PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further of indicated unless correcte maintenance fee notificat	d below or directed oth	g the Patent, advance or erwise in Block 1, by (a) specifying a new corresp	pondence address; an	mot (a) morearing a sche	correspondence address as rate "FEE ADDRESS" for	
	ENCE ADDRESS (Note: Use Blo	ock 1 for any change of address)	Fee(s	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
24197	7590 02/05/	/2008		Conte	ante of Mailine or Transi	micelon	
KLARQUIST S 121 SW SALMO SUITE 1600	SPARKMAN, LL ON STREET	P	I her State addr trans	eby certify that this F is Postal Service with essed to the Mail St imitted to the USPTO	sufficient postage for firstop ISSUE FEE address (571) 273-2885, on the di	deposited with the United t class mail in an envelope above, or being facsimile ate indicated below.	
PORTLAND, OR 97204				obert, F. Scotti		(Depositor's name)	
				de Sa	2	(Signature)	
				5/05/08		(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	A'	TTORNEY DOCKET NO.	CONFIRMATION NO.	
09/883,836			Brian Bailey	•		9966	
ITTLE OF INVENTION	: COHERENT STATE /	AMONG MULTIPLE SIN	MULATION MODELS IN				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE F		DATE DUE	
nonprovisional	NO	\$1440	\$0	\$0 1	\$1440	05/05/2008	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
STEVENS, 1. Change of correspond		2121	703-027000 2. For printing on the p				
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
DI BASE MOTE, Ile	less an assignee is ident th in 37 CFR 3.11. Com	ified helow no essionee	HE PATENT (print or type) data will appear on the patent. If an assignee is identified below, the document has been filed for a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY)				
Please check the appropr	riate assignee category or	r categories (will not be p	rinted on the patent) :	Individual Corp	oration or other private gre	oup entity Government	
4a. The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies			Bb. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-4550 (enclose an extra copy of this form).				
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other par							
NOTE: The Issue Fee an interest as shown by the	nd Publication Fee (if req records of the United St	puired) will not be accepte ates Patent and Trademarl	ed from anyone other than t k Office.	he applicant; a registe	ered attorney or agent; or the	he assignee or other party in	
Authorized Signature // Ala See			Date 5/85/08				
Typed or printed name Robert F. Scotti			Registration No. 39,830				
an application. Confider submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	d application form to the displication form to the displication form to the displication form to the displication for reducing this but but the displication for the displication form to the displication for the displication form to the displication form to the displication form to the displication for the displication	S U.S.C. 122 and 37 CFR e USPTO. Time will var orden, should be sent to to O NOT SEND FEES OR	1.14. This collection is est y depending upon the indivine Chief Information Office COMPLETED FORMS To	vidual case. Any comer, U.S. Patent and Tr O THIS ADDRESS.	ments on the amount of ti rademark Office, U.S. Den	d by the USPTO to process) ag gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450, 1 number.	